

RECEIVED

SEP 25 2006

Please type. Do not complete by hand.

FORM 1 GENERAL		U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program (Read the "General Instructions" before starting)		I. EPA I.D. NUMBER	
EPA		38700013 *NX OH 0028185		3PD00013	
LABEL ITEMS		Check I.D. # 387627 Revenue I.D. # 578570 Person I.D. # Org. I.D. # Place I.D. # 44752		If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.	
I. EPA I.D. NUMBER					
III. FACILITY NAME					
V. FACILITY MAILING ADDRESS					
VI. FACILITY LOCATION					
II. POLLUTANT CHARACTERISTICS					
INSTRUCTIONS: Complete A through G to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms .					
SPECIFIC QUESTIONS		MARK 'X'		SPECIFIC QUESTIONS	
		YES	NO	FORM ATTACHED	
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X			
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)					
E. Is this a facility which does not discharge process wastewater ? (FORM 2E)					
G. Do you generate sewage sludge that is ultimately regulated by Part 503? Do you generate sewage sludge that is sent to another facility for treatment or blending? Do you process or derive material from sewage sludge that is disposed in a manner subject to Part 503? (FORM 2S)		X			
B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)					
D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)					
F. Is this a facility which discharges stormwater associated with industrial activity? (FORM 2F)					
III. NAME OF FACILITY					
Wooster WWTP					
IV. FACILITY CONTACT					
A. NAME & TITLE (last, first, title)				B. PHONE (area code & no.)	
Hunter, Michael A., Utilities manager				(330) 263 - 5285	
V. FACILITY MAILING ADDRESS					
A. STREET OR P.O. BOX					
1123 Old Columbus Road					
B. CITY OR TOWN		C. STATE		D. ZIP CODE	
Wooster		OH		44691	
VI. FACILITY LOCATION					
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER					
1123 Old Columbus Road					
B. COUNTY NAME					
Wayne					
C. CITY OR TOWN		D. STATE		E. ZIP CODE	
Wooster		OH		44691	
				F. COUNTY CODE (if known)	
				85	

PAID

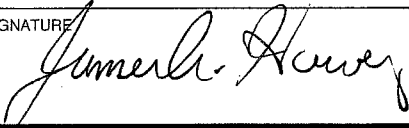
Click to clear all entered information (on both pages of this form)

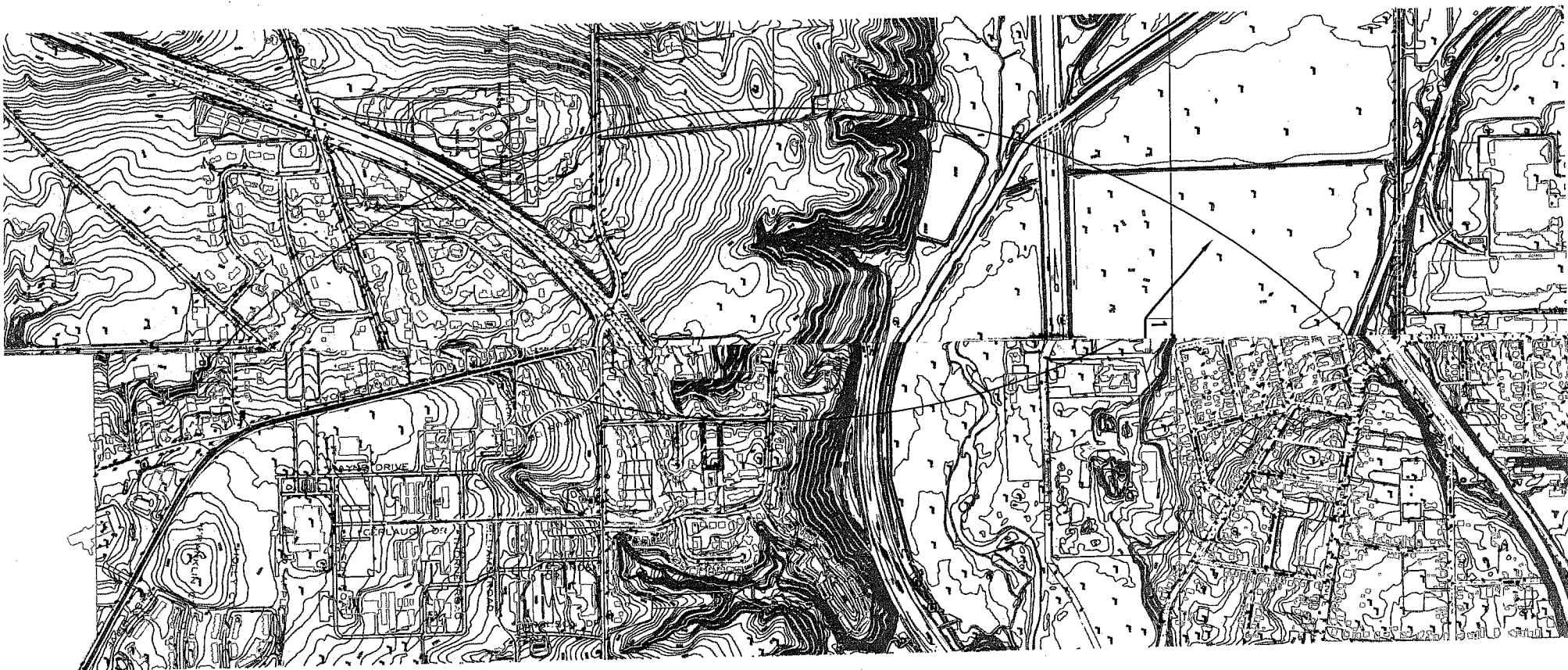
CLEAR

AMT 200⁰⁰ DATE 9-25-06

CK # 402631 DATE 9-27-06

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)			
A. FIRST		B. SECOND	
(specify) 4952		(specify)	
C. THIRD		D. FOURTH	
(specify)		(specify)	
VIII. OPERATOR INFORMATION			
A. NAME			B. Is the name listed in Item VIII-A also the owner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
City of Wooster			
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)			D. PHONE (area code & no.)
F = FEDERAL S = STATE P = PRIVATE	M = PUBLIC (other than federal or state) O = OTHER (specify)	M	(330) 263 - 5244
E. STREET OR P.O. BOX			
538 North Market Street			
F. CITY OR TOWN	G. STATE	H. ZIP CODE	IX. INDIAN LAND
Wooster	OH	44691	Is this facility located on Indian lands? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
X. EXISTING ENVIRONMENTAL PERMITS			
A. NPDES (Discharges to surface water)		D. PSD (Air emissions from proposed sources)	
3PD00013*LD		02-85-03-0411	
B. UIC (Underground injection of fluids)		E. OTHER (specify)	
		(specify)	
C. RCRA (Hazardous waste)		F. OTHER (specify)	
		(specify)	
XI. MAP			
Attach to this application a topographical map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers, and other surface water bodies in the map area. See instructions for precise requirements.			
XII. NATURE OF BUSINESS (provide a brief description)			
Treatment of industrial and domestic wastewaters.			
XIII. CERTIFICATION (see instructions)			
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			
A. NAME & OFFICIAL TITLE (type or print)		B. SIGNATURE	C. DATE SIGNED
James A. Howey, Mayor			9/21/06
COMMENTS FOR OFFICIAL USE ONLY			



9/21/2006 9:45:02 AM, 1:1000,

City of Wooster WPCP Topo Map

For Agency Use	Facility Name:	Date Received (yy/mm/dd)
	Ohio EPA Permit Number:	Application Number:



Form 2A
NPDES Application for Permit to Discharge Wastewater
Publicly-Owned Treatment Works

I. Outfall Information

(All treatment works must complete Part I)

A. Description of Outfall. List all effluent outfalls through which sanitary wastewater is discharged. Do not include information on combined sewer overflows (CSO) or collection system / treatment works bypass points.

Outfall Number	Latitude			Longitude			Discharge Point Location	Receiving Water
	Deg.	Min.	Sec.	Deg.	Min.	Sec.		
001	40	47	08	81	57	04	Final Effluent	Killbuck Creek

Latitude/Longitude Data Comments: None

B. Intermittent Discharges. Except for storm runoff, leaks, or spills are any of the discharges described in Item A intermittent or seasonal?

 Yes (Complete the following table) X No

Outfall Number	Period of Discharge	Frequency	Duration

II. Treatment Works Information

(All treatment works must complete Part II. The treatment works includes the collection system and treatment plant.)

A. Population. List the municipalities or areas served (municipalities and unincorporated service areas). Also, list their populations or total population served. (Attach additional pages as needed)

Municipality or Area	Population Served
City of Wooster	26,411
Total Population Served:	26,411

B. Collection System

1. Indicate the type(s) of collection system(s) tributary to this treatment plant; check all that apply. Also estimate the percent contribution (by miles) of each.

 X Separate Sanitary Sewer 70 %
 X Combined Storm and Sanitary Sewer 30 %

2. Are you responsible for maintenance of the entire collection system tributary to the treatment plant?

 X Yes No (List entities who are responsible for the collection system below)

3. Total number of lift stations in your collection system.

 9 Separate Sanitary
 2 Combined Storm and Sanitary

4. Does your collection system have bypasses or overflows? (Do not include CSOs)

 Yes X No

If yes, are the overflows or bypasses:

- a. at locations specifically constructed to provide hydraulic relief to the collection system
 b. unintentional and beyond the reasonable control of the operator

For the overflows or bypasses that are "specifically constructed", complete the following table.

Discharge Point Location	Latitude			Longitude			Receiving Water	Treatment Description
	Deg.	Min.	Sec.	Deg.	Min.	Sec.		

Latitude/Longitude Data Comments: _____

5. List source(s) of water supply that services the entire collection system. (Attach additional pages as needed)

Source Type	Source Location	Owner
groundwater	North Well Field	City of Wooster
groundwater	South Well Field	City of Wooster

C. Inflow and Infiltration

1. Estimate the current average inflow and infiltration flow rate in gallons per day (gpd) for the sewerage system:

 2,107,000 gpd

2. Briefly explain any steps underway or planned to minimize inflow and infiltration. (Attach additional pages as needed)
Continuation of the sewer separation plan. Currently the City spends approximately \$2M/year on this program.
Implementation of the Long Term Control Plan. Continuation of system flow monitoring and smoke testing program.

- D. Flow. Indicate the design influent flow rate of your treatment plant. Also provide the annual average daily flow rate for each of the last three years (mgd to three decimal places).

1. Design daily influent flow rate: 7.500 mgd

- Two Years Ago Last Year This Year
2. Annual average daily flow rate: 5.704 6.229 4.748 mgd
3. How was flow rate determined?
- ☒ Parshall Flume ☐ Weir ☐ Venturi ☐ Electromagnetic ☐ Sonic ☐ Estimate ☐ Other
4. Location where flow rate was measured: Effluent line before UV chamber
5. Are there current or expected plans to expand the existing treatment plant capacity during the life of the permit?
- ☒ Yes (Provide details on expansion on separate page) ☐ No

E. Treatment System Description (Attach additional pages as needed)

1. Give the approximate year of the treatment plant construction: 1938
2. Give the approximate year of the treatment plant last major modification: 2006
3. List all treatment units at the treatment plant. Do not include units for treating sewage sludge.

Treatment Code (See Instructions)	Treatment Type	Manufacturer (if known)
01	Influent Pumping	Fairbanks Morse
02	Bar Screen	Unknown
03	Grit Removal	Unknown
04	Communitation	JWC Environmental
08	Primary Sedimentation	Eimco
25	Activated Sludge - Extended Aeration	SaniTaire
39	Secondary Clarification	Eimco
71	Post Aeration	Hydro-Mechanics
77	Ultraviolet	Aquionics

4. Does this treatment plant have provisions for bypassing untreated or partially-treated wastewater?

☐ Yes (Complete the following table) ☒ No

Bypass Location	Station Number (if applicable)	Bypass Type	Number of times used in last year

5. Does your treatment plant have backup generators or other provision(s) to allow operation and/or treatment to continue during power outages?

☒ Yes ☐ No

6. Provide a line drawing showing the wastewater flow through the treatment plant, including all bypass piping.

F. Treatment Operations

1. Number of employees at the treatment works

8 Collection system 8 hr/day 5 days/wk
14 Treatment plant 24 hr/day 7 days /wk

2. Name and certification of person in responsible charge of the treatment works.

Michael A. Hunter, Class IV (WW4-1010947-97)

3. Name and certification of person in responsible charge of each collection system tributary to the treatment plant (if known). (Attach additional pages as needed)

Michael A. Hunter, Class IV (WW4-1010947-97)

4. Does the treatment works (collection system and/or treatment plant) have an Operations and Maintenance Manual?

X Yes (Complete the following table. Attach additional pages as needed.) No

Type	Developed By	Date Developed	Date of Last Modification
O & M	Jones & Henry Engineers, Ltd.	1988	1988

G. Improvements

1. Are you required by any Federal, State, or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions administrative orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

X Yes (Complete the following table. Attach additional pages as needed.) No

Identification of Condition	Outfall Number	Description of Project	Final Compliance Date
Overflows	005	Limit overflows at station 005 to 5 year storm events	04/07/2007

2. Optional: You may provide information describing any additional water pollution control programs (or other environmental projects which may affect your discharge) that are currently in progress or planned. Indicate the implementation schedule for the programs.

III. Combined Sewers System Information *(Attach additional pages as needed)*

A. Does the treatment works have CSOs in the collection system?

 X Yes *(Complete the following table for each CSO)* No

Outfall Number	Description	Latitude			Longitude			Receiving Water
		Deg.	Min.	Sec.	Deg.	Min.	Sec.	
003	Bever St. Swirl Concentrator	40	47	32	81	56	10	Apple Creek
004	Elm St. Swirl Concentrator	40	47	25	81	56	31	Apple Creek
005	Apple Creek Overflow	40	47	17	81	56	38	Apple Creek

Latitude/Longitude Data Comments: None

B. **System Evaluation.** List below studies that have been performed of the combined sewer collection system since the last permit application. Include modeling studies, hydraulic studies, past monitoring efforts, facility plans, etc.

Date	Title/Description	Author
<u>04/01/2000</u>	<u>Master Plan - Sewer Separation</u>	<u>Finkbeiner, Pettis & Strout (FPS)</u>
<u>01/20/2004</u>	<u>Long Term Control Plan</u>	<u>GGJ, Inc.</u>
<u>04/01/2006</u>	<u>Master Plan - Sewer Separation</u>	<u>Arcadis (FPS)</u>

IV. Industrial Users Information

A. **Number of Industrial Users.** Provide the number of each of the following types of industrial users that discharge to this treatment works.

1. Number of Industrial Users: 20
2. Number of non-categorical significant industrial users (SIU): 3
3. Number of categorical industrial users: 4

B. **Average Daily Flow from all Industrial Users.** Estimate the total average daily wastewater flow from all industrial users.

1. All industrial users: 0.539 mgd
2. Non-categorical SIUs only: 0.413 mgd
3. Categorical industrial users only: 0.040 mgd

C. **Pretreatment Program.** Does this POTW have an approved pretreatment program? X Yes No
If *no*, does this POTW have technically-based local limits? Yes No

D. **Local Limits Evaluation.** All POTWs with an approved pretreatment program are required to provide a written technical evaluation of the need to revise local limits under 40 CFR 122.21(j). Attach a copy of the evaluation to the application.

V. Remediation Waste Clean Up Information

A. RCRA/CERCLA/BUSTR/VAP Wastes. Does the treatment works currently receive (or is it expected during the life of the permit to receive) RCRA hazardous waste, CERCLA (Superfund) site remediation waste, RCRA corrective action waste, BUSTR waste or VAP waste?

_____ Yes (Complete the following table. Attach additional pages as needed.)

☒ No

Type of Action	Waste Origin	Waste Description

VI. Contract Laboratory Information

A. Contract Laboratory Analysis Information. Are any of the analyses used to obtain effluent quality information or toxicity test data performed by a contract laboratory or consulting firm?

☒ Yes (Complete the following table. Attach additional pages as needed.)

_____ No

Name	Address	Telephone Number	Pollutants Analyzed
Alloway	508 Bissman Ct., Mansfield, OH 44906	419-223-1362	All as specified in Permit
EA Group	7118 Industrial Park Blvd., Mentor, OH 44060	440-951-3514	Nitrite/Nitrate, CN - free and Chrom Hex

VII. Biological Toxicity Test Data

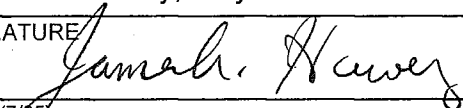
POTWs with a design flow rate greater than 1 mgd or POTWs with an approved pretreatment program must provide the results of whole effluent biological toxicity tests for acute or chronic toxicity for each discharge. The tests must have been performed during the last three years and must have followed Ohio EPA testing protocol. **See instructions for minimum test requirements.**

Is a Whole Effluent Biological Toxicity Test being submitted? ☒ Yes _____ No

If answered *no* above, but required to submit, provide explanation:

VIII. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME AND OFFICIAL TITLE (type or print) James A. Howey, Mayor	B. PHONE NO. (area code & no.) 330-263-5245
C. SIGNATURE 	D. DATE SIGNED 9/21/06

NPDES Form 2A – Section D Response to Question 5

Are there current or expected plans to expand the existing treatment plant during the life of the permit? Answer: Yes.

The City of Wooster is currently under construction of the WPCP to improve performance at the current daily design flow rate of 7.5 mgd with an increase in the peak daily flow rate from 15.0 mgd to 27.0 mgd. Modifications and improvements include but are not limited to:

1. modify influent screening facilities
2. demolish existing Detritor
3. modify and expand influent pumping facilities
4. modify FOG removal process
5. modify existing primary settling tanks
6. construct new BioPHOS Reactor
7. covert existing aeration tanks to Vertical Loop Reactors
8. construct new MLSS screening building
9. construct new secondary distribution chamber
10. demolish nitrification towers and appurtenances
11. construct new secondary sludge pump station
12. construct two (2) new secondary settling tanks
13. construct new flood wall
14. construct new Parshall Flume
15. convert chlorine tank to UV
16. modify effluent pumping
17. covert two (2) anaerobic digesters to Sequencing Facultative Digesters
18. convert sludge mix tank to support Sequencing Facultative Digesters
19. modify existing anaerobic digesters
20. construct new Septage Receiving Station and pretreatment facilities
21. covert filter building to switchgear/methane generator building
22. modify site to support improvements
23. demolish various existing facilities to support improvements
24. construct new HVAC to support improvements
25. construct new SCADA system

The foregoing modifications and improvements will satisfy the requirements of the existing permit, Part I, C – Schedule of Compliance (A: Municipal Construction Schedule, paragraph 1) that requires the City of Wooster to “eliminate overflows from the Apple Creek Interceptor sewer (005) up to an estimated five-year precipitation event.”

For Agency Use	Facility Name:	Date Received (yy/mm/dd)
	Ohio EPA Permit Number:	Application Number:



Form 2S NPDES Application for Sewage Sludge Use or Disposal

I. General Information

A. Treatment System Description

1. List all treatment units used for collecting, dewatering, storing, or treating sewage sludge:

Treatment Code	Treatment Type	Manufacturer
C2	Primary Sedimentation	Eimco
A6	Gravity Thickner	Unknown
94	Anaerobic Didedtion	Unknown
A2	Sludge Lagoon	Unknown
C4	Land Spreading	N/A

2. Provide a line drawing that identifies all sewage sludge treatment processes that will be employed during the term of the permit.
3. Is this facility a Class I sludge management facility? Class I facilities include POTWs required to have an approved pretreatment program. ☒ Yes ☐ No
4. Process design capacity of the sewage sludge treatment system (gallons of sludge/yr x 8.34 lb/gal x tons/2000 lb x percent solids): 1,224 dry tons/yr
5. Date of the sewage sludge treatment system construction or last major modification: 01/01/2003

B. Amount Generated On Site

1. Total sewage sludge generated at your facility for the most recent year: 785 dry tons
2. Do you receive sewage sludge from other generators? ☐ Yes ☒ No
If yes, total received from other generators for the most recent year: _____ dry tons
3. Do you receive domestic septage? ☐ Yes ☒ No
If yes, total amount of domestic septage received for the most recent year: _____ gallons

C. Pollutant Information. Using the table below, provide data on the pollutant concentrations in sewage sludge from your facility during the previous year.

Laboratory Name: Alloway Environmental Testing Services, Mansfield, OH

Pollutant Name	CAS #	No. of Analyses	Average Concentration (mg/kg)	Maximum Monthly Average Concentration (mg/kg)	Range of Data (Min. - Max.) (mg/kg)	Minimum Detection Level
Arsenic	7440-38-2	10	4.63	8.86	1.54-8.86	1.67
Cadmium	7440-43-9	10	2.26	4.12	1.44-4.12	0.52
Copper	7440-50-8	10	78.26	332.00	5.66-332.00	1.38
Lead	7439-92-1	10	20.33	76.40	3.93-76.40	1.72
Mercury	7439-97-6	10	0.00	0.00	0.00-0.00	1.72
Molybdenum	7439-98-7	10	2.05	20.50	0.00-20.50	3.45
Nickel	7440-02-0	10	7.48	28.50	1.69-28.50	1.38
Selenium	7782-49-2	10	5.77	10.90	0.64-10.90	1.53
Zinc	7440-66-6	10	133.07	543.00	11.00-543.00	1.72

D. Sewage sludge treatment and disposal characteristics. Complete the following to determine the applicability of your facility's sewage sludge use or disposal practices. If you answer yes to any question, you must complete the applicable section. Complete all sections that apply to your facility.

NO	Is sewage sludge from your facility hauled to another facility that provides treatment or blending? This section does <u>not</u> apply to sewage sludge hauled to land application or surface disposal sites. (Section II: Shipment Off Site for Treatment)
YES	Is sewage sludge from your facility applied to the land? This section includes exceptional quality sewage sludge (EQS) and sewage sludge applied to land reclamation sites. (Section III: Land Application of Bulk Sewage Sludge)
NO	Is sewage sludge from your facility placed on a surface disposal site? (Section IV: Surface Disposal)
NO	Is sewage sludge from your facility fired in a sewage sludge incinerator? (Section V: Incineration)
NO	Is sewage sludge from your facility placed on a municipal solid waste landfill? (Section VI: Disposal In a Municipal Solid Waste Landfill)

II. Shipment Off Site for Treatment or Blending

A. Total sewage sludge hauled to all receiving facilities for the most recent year: _____ dry tons

B. Information on off site treatment or blending. Complete this section for each receiving facility *(Attach additional pages as necessary)*

1. Name of facility: _____

2. Facility contact: Name: _____

Title: _____ Phone: _____

3. Facility location: Street: _____

City: _____ State: _____ Zip: _____

4. Total sewage sludge provided to this receiving facility for the most recent year: _____ dry tons

III. Land Application of Bulk Sewage Sludge

A. Land Application Generation Information

1. Total sewage sludge from your facility applied to all land application sites for the most recent year: 785 dry tons
2. Total number of land application sites currently assigned an Ohio EPA site identification number: 153
3. Total acreage of land application sites currently assigned an Ohio EPA site identification number: 3,800
4. List all counties that you currently (or you expect during the life of the permit to) land apply sewage sludge.

5. Are any land application sites located in states other than Ohio? Yes X No

If yes, describe how you notify the permitting authority for the States where the land application sites are located.

6. Does sewage sludge from your facility meet the ceiling concentration limits in Table 1 of 40 CFR 503.13 and the pollutant concentrations in Table 3 of 40 CFR 503.13? X Yes No

If yes, provide total percentage from Section III A.1 that met the ceiling and pollutant concentrations for the most recent year that was land applied: 100%

7. Does sewage sludge from your facility meet the ceiling concentrations in Table 1 of 40 CFR 503.13 but does not meet the pollutant concentrations in Table 3 of CFR 503.13? Yes X No

If yes, provide total percentage from Section III A.1 that met the ceiling concentrations but not the pollution concentrations for the most recent year that was land applied:

8. What percentage of sewage sludge from Section III A.1 (in dry tons per year) is achieved for each pathogen reduction class? Class A 100% Class B

9. Which Pathogen Reduction Alternative is used to achieve the class? (Choose all that apply)

Class A		Class B
Thermally Treated Biosolids		Monitoring of Indicator Organisms
Biosolids Treated in a High pH- Temp.		PSRP, Aerobic Digestion
Biosolids Treated in Other Processes		PSRP, Air Drying
Biosolids Treated in Unknown Processes	X	PSRP, Anaerobic Digestion
PFRP, Composting		PSRP, Composting
PFRP, Heat Drying		PSRP, Lime Stabilization
PFRP, Thermophilic Aerobic Digestion		Biosolids Treated in a PSRP Equivalent
PFRP, Beta Ray Irradiation		
PFRP, Gamma Ray Irradiation		
PFRP, Pasteurization		
PFRP, Heat Treatment		
Biosolids Treated in a PFRP Equivalent		

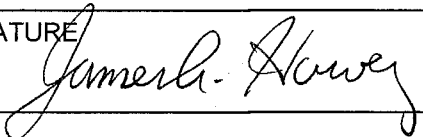
1. Name of facility: _____
2. Incinerator air permit number: _____
3. Facility contact: Name: _____
Title: _____ Phone: _____
4. Facility location: Street: _____
City: _____ State: _____ Zip: _____
5. Total sewage sludge from your facility fired in this sewage sludge incinerator for the most recent year:
_____ dry tons

VI. Disposal in a Municipal Solid Waste Landfill

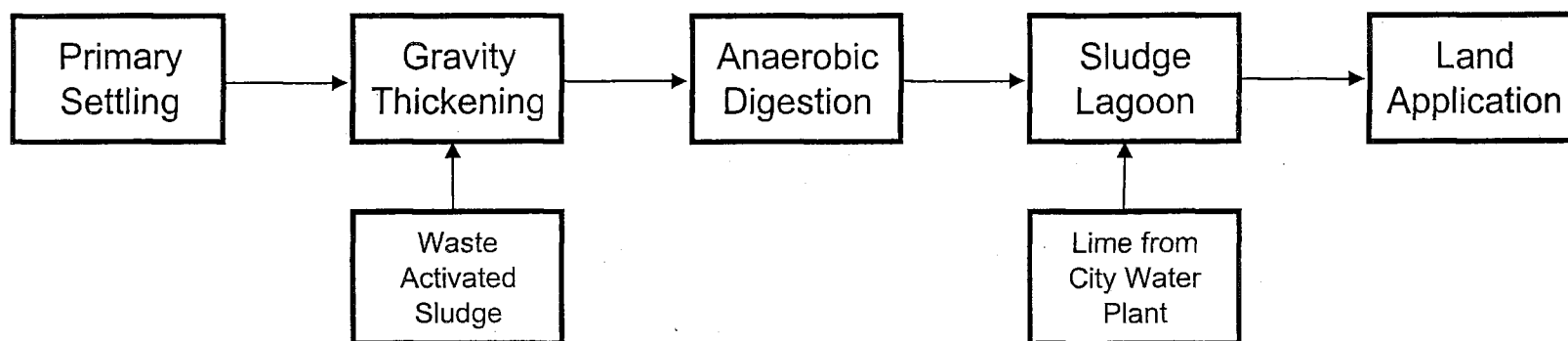
- A. Total sewage sludge from your facility placed in all municipal solid waste landfills for the most recent year:
_____ dry tons
- B. **Information on municipal solid waste landfills.** Complete this section for each municipal solid waste landfill.
(Attach additional pages as necessary)
1. Name of facility: _____
 2. Facility contact: Name: _____
Title: _____ Phone: _____
 3. Facility location: Street: _____
City: _____ State: _____ Zip: _____
 4. Total sewage sludge from your facility fired in this sewage sludge incinerator for the most recent year:
_____ dry tons

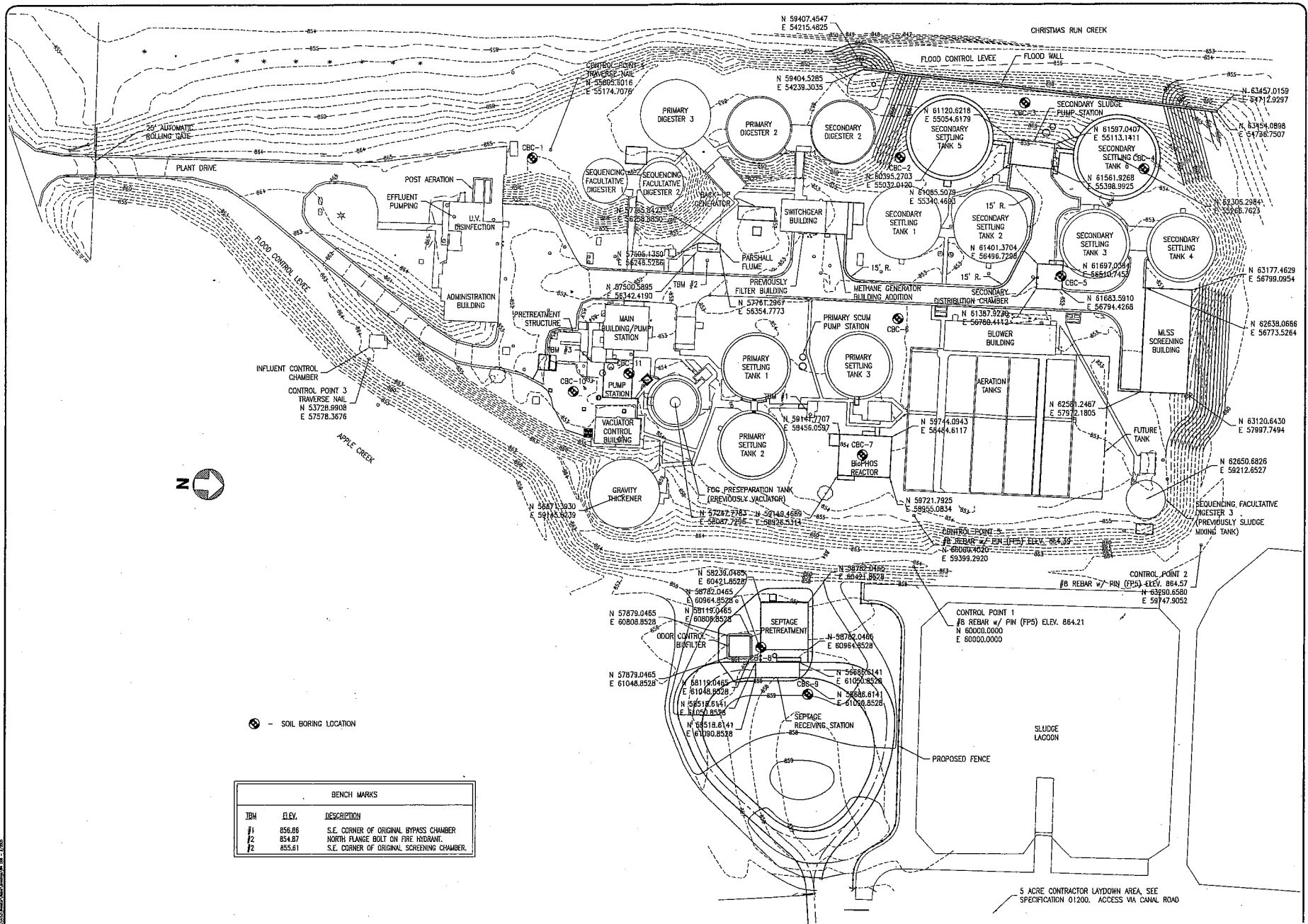
VII. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME AND OFFICIAL TITLE (type or print) James A. Howey, Mayor	B. PHONE NO. (area code & no.) (330) 263-5245
C. SIGNATURE 	D. DATE SIGNED 9/21/06

City of Wooster WPCP Sewage Sludge





REVISIONS

DATE	DESCRIPTION	BY



CITY OF WOOSTER, OHIO WATER POLLUTION CONTROL PLANT IMPROVEMENTS

PROPOSED SITE PLAN



9131 755-1942

REVIEWED BY:	EJB
CHECKED BY:	EJB
DRAWN BY:	KFW
DESIGN BY:	EDT
DATE:	MAY 2005
SCALE:	1"=40'-0"

JOB NUMBER:

DRAWING NO.:

C-8

**CITY OF WOOSTER
WATER POLLUTION CONTROL PLANT**

**TECHNICAL JUSTIFICATION OF
LOCAL INDUSTRIAL USER LIMITATIONS**

AUGUST 2002

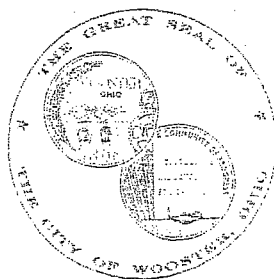
The work completed in the preparation of the proposed local industrial user limitations for the City of Wooster; as described in this report, has been completed in accordance with good engineering practices.



Laura M. Ankrom, P.E., State of Ohio
#E-64430

8/27/02
Date

JAMES A. HOWEY
Mayor



MICHAEL A. HUNTER
Utilities Manager
Phone (330) 263-5290
(330) 263-5286
Fax (330) 263-5291

CITY OF WOOSTER

1123 Old Columbus Road
WOOSTER, OHIO 44691-4618

August 28, 2002

Mr. Andrew Conway
Pretreatment Unit
Ohio Environmental Protection Agency
Lazarus Government Center
122 South Front Street
Columbus, Ohio 43215

**RE: City of Wooster WPCP Local Industrial User Limitations Technical Justification
NPDES Permit No. 3PD00013*KD**

Dear Mr. Conway:

Please find enclosed the technical justification of the local industrial user limitations per Part I, Section C, Item B of the City of Wooster's NPDES Permit No. 3PD00013*KD.

Technical justification was evaluated for arsenic, cadmium, dissolved hexavalent chromium, total chromium, copper, free cyanide, lead, nickel, silver, and zinc. An evaluation of mercury's allowable industrial user limitation will be submitted per the timeline in the City's NPDES permit.

Thallium is not present in significant quantities in the WPCP's influent or sludge, nor are there significant industrial users believed to discharge thallium. Therefore, thallium was not evaluated in this submittal.

Dissolved hexavalent chromium was evaluated; however, the City does not believe a local limit is necessary at this time. There are no significant concentrations of dissolved hexavalent chromium in the influent or effluent and the maximum allowable headworks loading calculations yield a local limit higher than that for total chromium. The City will continue to monitor dissolved hexavalent chromium levels in the plant and if an increase in concentration is noted the need for a dissolved hexavalent chromium local limit will be reevaluated.

Given the foregoing, the City's current local limitations do not need to be revised at this time. The following table summarizes the proposed limitations:

City of Wooster, WPCP
Technical Justification, Local Limitations
August 28, 2002
Page 2

Pollutant	Proposed Limit (mg/L)	Basis for Limit
Arsenic	0.03	Existing
Cadmium	0.04	Existing
Chromium	1.25	Existing
Copper	0.48	Existing
Cyanide	0.29	Existing
Lead	0.43	Existing
Nickel	0.90	Existing
Silver	0.50	Existing
Zinc	0.77	Existing

If you have any questions or comments regarding this submittal, please feel free to contact me or the Pretreatment Coordinator, Lee Troyer, at (330) 263-5290.

Respectfully yours,

Michael A. Hunter

Michael A. Hunter, 4-97-001
Utilities Manager

MAH

Enclosure

c: James Borton, Asst. Utilities Manager, WPCP
Lee Troyer, Industrial Pretreatment Coordinator

TABLE OF CONTENTS

Section 1: Local Limits Summary

Section 2: Input Data

Section 3: Maximum Allowable Headworks Loading Calculations

Section 4: Parameter Allocation

Section 5: Sampling Data

Section 6: Facility Site Plan

LOCAL LIMITATION SUMMARY (mg/L)

Pollutant	Existing Limit*	Calculated Contributory Flow	Calculated Uniform Flow	Proposed Limit
<i>Arsenic</i>	0.03	0.28	0.25	0.03
<i>Cadmium</i>	0.04	1.62	0.06	0.04
<i>Chromium</i>	1.25	7.56	1.25	1.25
<i>Chromium, Hex.</i>	-	3.42	0.57	**
<i>Copper</i>	0.48	1.12	0.19	0.48
<i>Cyanide</i>	0.29	4.26	0.23	0.29
<i>Lead</i>	0.43	4.59	0.36	0.43
<i>Nickel</i>	0.90	19.29	1.47	0.90
<i>Silver</i>	0.50	44.49	2.20	0.50
<i>Zinc</i>	0.77	18.99	3.29	0.77

*The existing limitations were developed using the contributory flow method of allocation.

**A limit is not being proposed for Hexavalent Chromium at this time.

Input Data

Facility Name: Wooster Water Pollution Control Plant
Address: 1123 Old Columbus Road
Wooster, OH 44691
Facility Contact: Lee Troyer, Pretreatment Coordinator
Phone: (330)263-5200, Ext. 386

Flow Information:

<i>Plant Average Flow, MGD:</i>	5.6	<i>Sludge to Disposal, MGD:</i>	0.0300
<i>Industrial Flow, MGD:</i>	0.758	<i>Sludge to Disposal Percent Solids:</i>	7.6
<i>Domestic Flow, MGD:</i>	4.84	<i>Annual Dry Tons Sludge Applied:</i>	804.5
		<i>Dry Tons per Day:</i>	2.20

Plant Processes:

<i>Primary Clarification:</i>	X
<i>Activated Sludge:</i>	X
<i>Trickling Filter:</i>	
<i>Other Secondary:</i>	
<i>Nitrification:</i>	X
<i>Aerobic Sludge Digestion:</i>	
<i>Anaerobic Sludge Digestion:</i>	X

Input Data

Pollutant	Average Influent ¹ mg/L	Average Effluent ¹ mg/L	Average Domestic ^{2,3} mg/L	NPDES/ Water Quality ⁴ mg/L	Sludge to Disposal ⁵ mg/kg	Ceiling Conc. 503 Table 1 mg/kg	Application 503 Table 3 mg/kg
Arsenic	0.0106	0.0068	0.0037	0.178	22	75	41
Cadmium	0.0006	0.0006	0.0005	0.0054	0.9	85	39
Chromium	0.016	0.0136	0.0038	0.183	25	-	-
Chromium, Hex.	0.03725	0.00475	0.0038	0.013	-	-	-
Copper	0.033	0.0052	0.0861	0.020	66	4300	1500
Cyanide	0.0095	0.0095	0.0025	0.014	0.9	-	-
Lead	0.006	0.0017	0.0106	0.021	18	840	300
Mercury	0.00016	5.4E-05	TBD	0.0022	0.14	57	17
Molybdenum	0.0237	0.0192	0.0024	-	6	75	-
Nickel	0.0042	0.00195	0.0046	0.119	10	420	420
Selenium	0.0042	0.00333	0.0035	-	3	100	100
Silver	0.0062	0.00088	0.0016	-	-	-	-
Zinc	0.106	0.0382	0.207	0.281	138	7500	2800

¹Raw, settled and final concentration data was averaged from January 2001 through July 2002.

² When domestic sampling indicated all points BDL, 1/2 reported detection limit was used

³Domestic concentrations from sampling performed July 30, 2002 through August 5, 2002.

⁴Hexavalent chromium and cyanide values are monthly NPDES discharge monitoring requirements. All other values are water quality based criteria listed in Part X, Section 3 of the NPDES permit.

⁵Sludge Data taken from 2001 Annual Sludge Report.

Input Data

Pollutant	Activated Sludge Inhibition mg/L	Plant Influent mg/L	Inhibition Value Used mg/L	Removal Efficiency Primary %	Removal Efficiency Plant %	Safety Factor %
Arsenic	0.10	0.0106	0.10	23.0%	36.0%	b 20.0%
Cadmium	1.00	0.0006	1.00	15.0%	50.0%	a 20.0%
Chromium	1.00	0.016	1.00	0.0%	15.0%	b 20.0%
Chromium, Hex.	1.00	0.037	1.00	0.0%	87.0%	b 20.0%
Copper	1.00	0.033	1.00	39.0%	84.0%	b 20.0%
Cyanide	0.10	0.0095	0.10	27.0%	66.0%	a 20.0%
Lead	0.20	0.006	0.20	40.0%	71.0%	b 20.0%
Mercury	0.10	0.00016	0.10	61.0%	66.0%	b 20.0%
Molybdenum	-	0.0237	-	13.0%	19.0%	b 20.0%
Nickel	1.00	0.0042	1.00	22.0%	53.0%	b 20.0%
Selenium	-	0.0042	-	21.0%	21.0%	b 20.0%
Silver	0.25	0.0062	0.25	33.0%	86.0%	b 20.0%
Zinc	1.00	0.106	1.00	40.0%	64.0%	b 20.0%

a Literature Removal Rate Value

b Plant Data Removals determined during sampling program

Calculation of Pass-Through Headworks Loading (lbs/day)

POTW Name: Wooster Water Pollution Control Plant

Pollutant	NPDES Permit* mg/L	Removal Rate %	MAHL Limitation lbs/day
<i>Arsenic</i>	0.178	36.0%	12.9896
<i>Cadmium</i>	0.0054	50.0%	0.5044
<i>Chromium</i>	0.183	15.0%	10.0551
<i>Chromium, Hex.</i>	0.013	87.0%	4.6704
<i>Copper</i>	0.02	84.0%	5.8380
<i>Cyanide</i>	0.014	66.0%	1.9231
<i>Lead</i>	0.021	71.0%	3.3820
<i>Nickel</i>	0.119	53.0%	11.8251
<i>Silver</i>	-	86.0%	-
<i>Zinc</i>	0.281	64.0%	36.4551

*Hexavalent chromium and cyanide values are monthly NPDES discharge monitoring requirements. All other values are water quality based criteria listed in Part X, Section 3 of the NPDES permit.

Calculation of Process Inhibition Headworks Loading Limitation (lbs/day)

POTW Name: Wooster Water Pollution Control Plant

Pollutant	Inhibition Levels mg/L	Removal Rate %	Activated sludge MAHL lbs/day
<i>Arsenic</i>	0.1	23.0%	6.065
<i>Cadmium</i>	1	15.0%	54.946
<i>Chromium</i>	1	0.0%	46.704
<i>Chromium, Hex.</i>	1	0.0%	46.704
<i>Copper</i>	1	39.0%	76.564
<i>Cyanide</i>	0.1	27.0%	6.398
<i>Lead</i>	0.2	40.0%	15.568
<i>Nickel</i>	1	22.0%	59.877
<i>Silver</i>	0.25	33.0%	17.427
<i>Zinc</i>	1	40.0%	77.840

Calculation of Process Inhibition Headworks Loading Limitation (lbs/day)

POTW Name: Wooster Water Pollution Control Plant

Pollutant	Inhibition Levels mg/L	Removal Rate* %	Nitrification MAHL lbs/day
<i>Arsenic</i>	1.5	45.0%	127.375
<i>Cadmium</i>	5.2	67.0%	735.942
<i>Chromium</i>	0.25	82.0%	64.867
<i>Chromium, Hex.</i>	1	82.0%	259.467
<i>Copper</i>	0.05	86.0%	16.680
<i>Cyanide</i>	0.34	69.0%	51.224
<i>Lead</i>	0.5	61.0%	59.877
<i>Nickel</i>	0.25	42.0%	20.131
<i>Silver</i>	-	75.0%	-
<i>Zinc</i>	0.08	79.0%	17.792

*Literature values were used for all pollutants.

Calculation of Process Inhibition Headworks Loading Limitation (lbs/day)

POTW Name: Wooster Water Pollution Control Plant

Pollutant	Inhibition Levels mg/L	Removal Rate* %	Anaerobic MAHL lbs/day
<i>Arsenic</i>	1.6	45.0%	135.87
<i>Cadmium</i>	20	67.0%	2,830.55
<i>Chromium</i>	-	82.0%	-
<i>Chromium, Hex.</i>	110	82.0%	28,541.33
<i>Copper</i>	40	86.0%	13,344.00
<i>Cyanide</i>	4	69.0%	602.63
<i>Lead</i>	340	61.0%	40,716.31
<i>Nickel</i>	10	42.0%	805.24
<i>Silver</i>	13	75.0%	2,428.61
<i>Zinc</i>	400	79.0%	88,960.00

*Literature values were used for all pollutants.

Calculation of Sludge Disposal Headworks Loading Limitations (lbs/day)

POTW Name: Wooster Water Pollution Control Plant

Pollutant	Pollutant Concentration mg/kg	Removal Rate %	Sludge Disposal MAHL lbs/day
<i>Arsenic</i>	41	36.0%	2.1656
<i>Cadmium</i>	39	50.0%	1.4832
<i>Chromium</i>	-	15.0%	-
<i>Chromium, Hex.</i>	-	87.0%	-
<i>Copper</i>	1500	84.0%	33.9557
<i>Cyanide</i>	-	66.0%	-
<i>Lead</i>	300	71.0%	8.0346
<i>Nickel</i>	420	53.0%	15.0686
<i>Silver</i>	-	86.0%	-
<i>Zinc</i>	2800	64.0%	83.1915

Comparison of Headworks Loading Limitations (lbs/day)

POTW Name: Wooster Water Pollution Control Plant

Pollutant	Final Passthrough Loading	Final Inhibition*	Final Sludge Loading*	Final Headworks Limitation
Arsenic	12.9896	6.0655	2.1656	2.17
Cadmium	0.5044	54.9459	1.4832	0.504
Chromium	10.0551	46.7040	-	10.06
Chromium, Hex.	4.6704	46.7040	-	4.670
Copper	5.8380	76.5639	33.9557	5.84
Cyanide	1.9231	6.3978	-	1.923
Lead	3.3820	15.5680	8.0346	3.38
Nickel	11.8251	59.8769	15.0686	11.83
Silver	-	17.4269	-	17.43
Zinc	36.4551	77.8400	83.1915	36.46

*Nitrification and Anaerobic Digestion inhibition values were not considered in the final maximum headworks loading limitations because current loadings are acceptable to the WPCP's biological processes.

Conservative Parameter Allocation Using Contributory Flow Method

Pollutant	Max. Allowable HW. Loading lbs/day	Domestic Flow MGD	Domestic Loading lbs/day	Safety Factor 20%	Allowable Ind. Loading lbs/day	Contributory Ind. Flow MGD	Local Limit mg/L
Arsenic	2.17	4.92	0.15	0.43	1.58	0.679	0.28
Cadmium	0.50	5.57	0.02	0.10	0.38	0.028	1.62
Chromium	10.06	5.48	0.17	2.01	7.87	0.125	7.56
Chromium, Hex	4.67	5.48	0.17	0.93	3.56	0.125	3.42
Copper	5.84	5.52	3.97	1.17	0.70	0.076	1.12
Cyanide	1.92	5.56	0.12	0.38	1.42	0.040	4.26
Lead	3.38	5.54	0.49	0.68	2.22	0.058	4.59
Silver	17.43	5.56	0.11	3.49	13.83	0.037	44.49
Nickel	11.83	5.54	0.21	2.37	9.25	0.057	19.29
Zinc	36.46	5.48	9.45	7.29	19.71	0.124	18.99

1	Bell & Howell	Local Limits	0.009182	(Cr, Cr-hex, Ag, Zn)
2	Crown Steel	Categorical	0.018121	(As, Cr, Cr-hex)
3	Frito-Lay	Local Limits	0.614587	(As)
4	Gerstenslager, North	Categorical	0.02939	(Cr, Cr-hex, Pb, Ni, Zn)
5	Luk, Inc.	Categorical	0.010379	(As, Zn)
6	Rexroth	Categorical	0.040083	(Cr, Cr-hex, Cu, CN, Zn)
7	Wooster Products	Local Limits	0.007341	(As, Cu, Zn)
8	Ports Petroleum	Local Limits	0.000394	(Pb)
9	Enviroclean	Categorical	0.028095	(As, Cd, Cr, Cr-hex, Cu, Pb, Ni, Ag, Zn, Hg)
TOTAL:			0.758	

**Conservative Parameter Allocation
Using Uniform Contribution
Allowable Industrial Loading**

Pollutant	Maximum Allowable Headworks Loading lbs/day	Background Domestic Loading* lbs/day	Allowable Industrial Loading** lbs/day	Limiting Factor
Arsenic	2.17	0.149	1.58	Sludge
Cadmium	0.50	0.020	0.38	Passthrough
Chromium	10.06	0.153	7.89	Passthrough
Chromium, Hex.	4.67	0.153	3.58	Passthrough
Copper	5.84	3.477	1.19	Passthrough
Cyanide	1.92	0.101	1.44	Passthrough
Lead	3.38	0.428	2.28	Passthrough
Nickel	11.83	0.186	9.27	Passthrough
Silver	17.43	0.065	13.88	Inhibition
Zinc	36.46	8.359	20.80	Passthrough

*Domestic Loading based on domestic flow of 4.84 MGD

**Includes a 20% Safety Factor

Conservative Parameter Allocation Using Uniform Contribution

Pollutant	Allowable Industrial Loading lbs/day	Industrial Flow MGD	Local Limit mg/L
Arsenic	1.58	0.758	0.25
Cadmium	0.38	0.758	0.06
Chromium	7.89	0.758	1.25
Chromium, Hex.	3.58	0.758	0.57
Copper	1.19	0.758	0.19
Cyanide	1.44	0.758	0.23
Lead	2.28	0.758	0.36
Nickel	9.27	0.758	1.47
Silver	13.88	0.758	2.20
Zinc	20.80	0.758	3.29

Bell & Howell	0.009182
Crown Steel	0.018121
Frito-Lay	0.614587
Gerstenslager, North	0.02939
Luk, Inc.	0.010379
Rexroth	0.040083
Wooster Products	0.007341
Ports Petroleum	0.000394
Enviroclean	0.028095
TOTAL	0.758

WOOSTER WPCP SAMPLING DATA (ug/L)

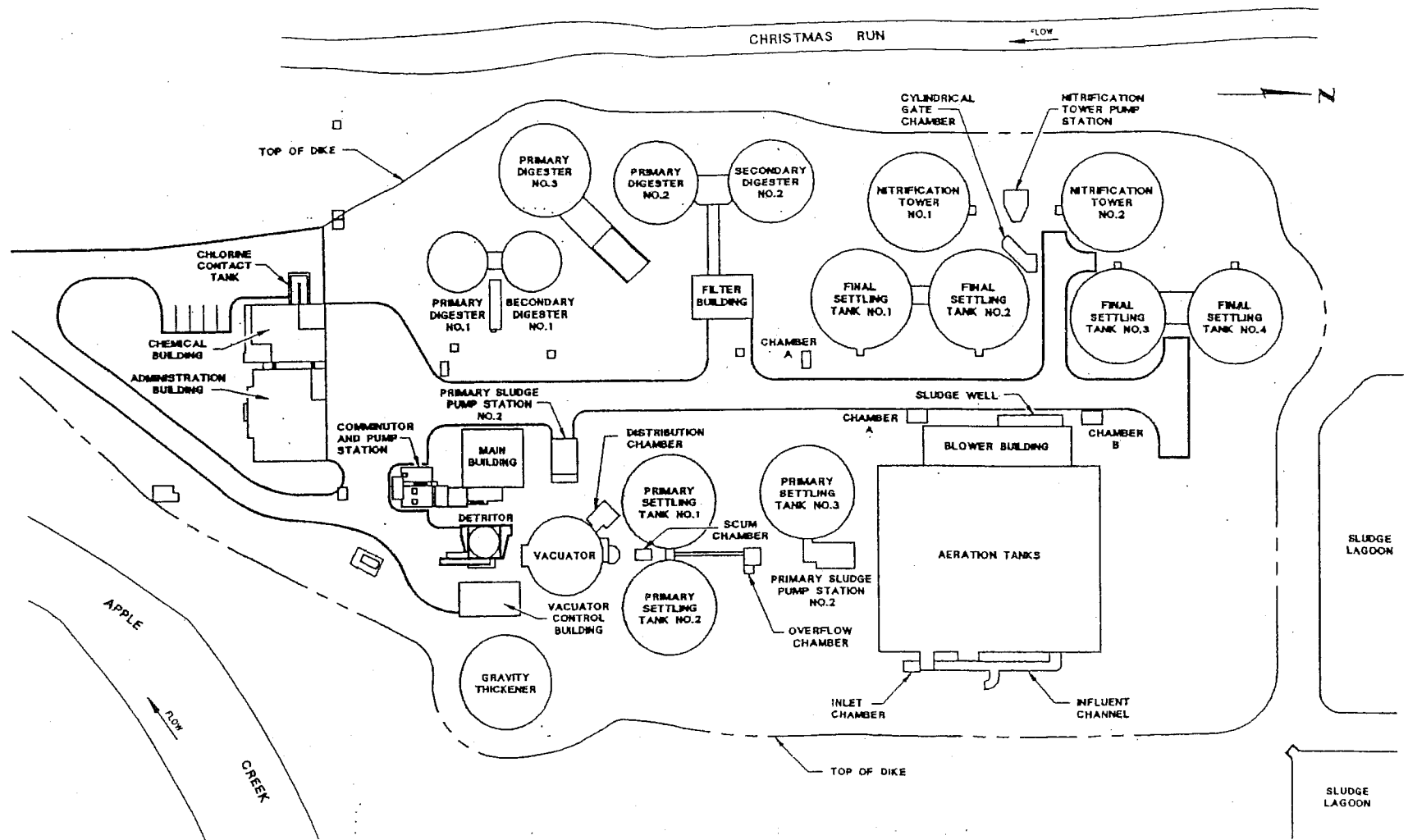
		As	Cd	Cr	Cu	Pb	Mo	Ni	Se	Ag	Zn	Hg	Cr, hex	CN
JAN	RAW	3.5	0.5	17	34	6	20	7	9	11	146	0.3	5	10
2001	SETTLED	3.5	0.5	20	20	1.5	18	6	3.5	9	93	0.05		
	FINAL	3.5	0.5	3	5	4	12	4	3.5	3	48	0.05	5	10
FEB	RAW	8	0.5	4	37	10	24	5	3.5	6	92	0.05	270	10
	SETTLED	8	0.5	6	23	6	22	5	3.5	4	64	0.05		
	FINAL	16	0.5	0.5	5	1.5	15	3	3.5	0.5	36	0.05	5	10
MAR	RAW	17	0.5	13	31	1.5	7	4	3.5	7	78	0.3	5	10
	SETTLED	14	0.5	15	21	1.5	12	5	3.5	6	59	0.05		
	FINAL	3.5	0.5	4	6	1.5	12	2	3.5	2	38	0.05	5	10
APR	RAW	10	0.5	43	38	13	21	9	3.5	10	184	0.2	5	10
	SETTLED	3.5	0.5	19	24	6	20	3	3.5	4	77	0.05		
	FINAL	14	0.5	38	7	1.5	13	1	3.5	0.5	48	0.05	5	10
MAY	RAW	10	0.5	12	26	1.5	21	4	10	6	121	0.05	5	10
	SETTLED	3.5	0.5	33	18	7	20	3	3.5	4	71	0.05		
	FINAL	3.5	0.5	12	5	1.5	19	1	3.5	1	35	0.05	5	10
JUN	RAW	3.5	0.5	10	22	8	13	2	3.5	4	60	0.05	5	10
	SETTLED	3.5	0.5	4	17	1.5	11	2	3.5	4	43	0.05		
	FINAL	3.5	0.5	4	2	1.5	12	1	3.5	0.5	18	0.05	5	10
JUL	RAW	16	0.5	22	38	11	28	7	3.5	7	94	0.05	5	10
	SETTLED	3.5	0.5	18	22	6	28	5	3.5	5	52	0.05		
	FINAL	3.5	0.5	30	4	1.5	25	2	3.5	0.5	22	0.05	5	10
AUG	RAW	3.5	0.5	25	38	12	42	6	3.5	13	119	0.2	5	10
	SETTLED	3.5	0.5	20	21	6	38	1	3.5	9	65	0.05		
	FINAL	3.5	0.5	11	3	1.5	31	1	3.5	0.5	42	0.05	5	10
SEP	RAW	12	0.5	16	35	7	28	4	3.5	5	97	0.05	5	10
	SETTLED	15	0.5	10	23	1.5	26	4	3.5	2	58	0.05		
	FINAL	3.5	0.5	11	5	1.5	26	4	3.5	0.5	40	0.05	5	10
OCT	RAW	8	0.5	13	39	8	52		9	10	172	0.05	250	10
	SETTLED	12	0.5	15	23	1.5	32		3.5	5	73	0.05		
	FINAL	3.5	0.5	7	3	1.5	32	3	3.5	0.5	47	0.05	5	10
NOV	RAW	12	0.5	15	29	5	20	2	3.5	5	97	0.1	5	10
	SETTLED	3.5	0.5	12	18	10	21	1	3.5	4	66	0.05		
	FINAL	3.5	0.5	8	4	5	21	1	3.5	0.5	41	0.05	5	10
DEC	RAW	9	2	32	42	5	14	7	3.5	9	120	1.08	35	10
	SETTLED	11	2	7	17	1.5	13	3	3.5	6	52	0.27		
	FINAL	9	2	13	6	1.5	11	1	3.5	1	32	0.18	5	10
JAN	RAW	39	0.5	0.5	24	1.5	25	7	3.5	7	84	0.05	100	10
2002	SETTLED	12	0.5	47	20	1.5	12	4	3.5	4	67	0.11		
	FINAL	18	0.5	63	5	1.5	9	1	3.5	0.5	34	0.05	5	10

FEB	RAW	8	0.5	21	21	8	29		3.5	5	108	0.18	5	10
	SETTLED	14	0.5	13	14	1.5	28	3	3.5	2	67	0.05		
	FINAL	3.5	0.5	1	4	1.5	27	2	3.5	0.5	36	0.05	5	10
MAR	RAW	12	0.5	43	86	4	22	3	3.5	6	113	0.11	20	10
	SETTLED	14	0.5	21	53	7	21	5	3.5	5	84	0.05		
	FINAL	3.5	0.5	19	6	1.5	20	1	3.5	2	48	0.05	5	10
APR	RAW	10	0.5	4	18	1.5	14	1	3.5	1	48	0.05	5	10
	SETTLED	10	0.5	13	17	1.5	12	1	3.5	2	44	0.05		
	FINAL	3.5	0.5	18	4	1.5	12	1	3.5	0.5	30	0.05	5	10
MAY	RAW	3.5	0.5	20	31	6	32	6	3.5	6	148	0.2	5	10
	SETTLED	3.5	0.5	30	21	1.5	33	6	3.5	4	99	0.05		
	FINAL	3.5	0.5	15	5	1.5	32	1	3.5	2	64	0.05	5	10
JUN	RAW	14	0.5	8	26	1.5	25	4	3.5	0.5	117	0.05	5	10
	SETTLED	18	0.5	20	12	1.5	13	4	3.5	0.5	80	0.05		
	FINAL	22	0.5	13	21	1.5	21	4	3.5	0.5	61	0.05	5	10
JUL	RAW	13	0.5	0.5	49	7	36	5	3.5	5	121	0.05	5	10
	SETTLED	7	0.5	0.5	23	6	32	4	3.5	3	66	0.05		
	FINAL	11	0.5	0.5	4	1.5	34	5	3.5	0.5	44	0.05	5	10
		As	Cd	Cr	Cu	Pb	Mo	Ni	Se	Ag	Zn	Hg	Cr, hex	CN
TOTAL	RAW	212	11	319	664	117.5	473	83	84	123.5	2119	3.17	745	190
	SETTLED	163	11	323.5	407	70.5	412	65	66.5	82.5	1280	1.23	-	-
	FINAL	135.5	11	271	104	34.5	384	39	66.5	17.5	764	1.08	95	190
AVERAGE	RAW	10.6	0.55	15.95	33.2	5.875	23.65	4.15	4.2	6.175	105.95	0.1585	37.25	9.5
	SETTLED	8.15	0.55	16.175	20.35	3.525	20.6	3.25	3.325	4.125	64	0.0615	-	-
	FINAL	6.775	0.55	13.55	5.2	1.725	19.2	1.95	3.325	0.875	38.2	0.054	4.75	9.5
Primary Removal		23	0	-1	39	40	13	22	21	33	40	61	-	-
Final Removal		36	0	15	84	71	19	53	21	86	64	66	87	0

WOOSTER WPCP
BACKGROUND SAMPLING RESULTS
July 30, 2002 - August 5, 2002
(ug/L)

		Cd	Cr	Cu	Pb	Ni	Zn	Ag	As	Mo	Se	CN
SOUTH	30-Jul	0.5	4	95	9	3	283	0.5	3.5	1	3.5	2.5
	31-Jul	0.5	0.5	59	8	1	128	0.5	3.5	2	3.5	2.5
	1-Aug	0.5	11	149	16	8	379	0.5	3.5	2	3.5	2.5
	2-Aug	0.5	6	80	13	2	251	1	3.5	2	3.5	2.5
	3-Aug	0.5	7	74	7	2	178	0.5	2	0.5	3.5	2.5
	4-Aug	0.5	8	77	10	3	167	0.5	3.5	2	3.5	2.5
	5-Aug	0.5	2	70	10	2	123	0.5	3.5	2	3.5	2.5
WEST	30-Jul	0.5	4	86	12	4	596	2	3.5	2	3.5	2.5
	31-Jul	0.5	5	142	24	6	241	0.5	3.5	4	3.5	2.5
	1-Aug	0.5	1	108	10	4	186	2	3.5	2	3.5	2.5
	2-Aug	0.5	2	84	11	30	190	1	3.5	2	3.5	2.5
	3-Aug	0.5	2	106	11	3	193	0.5	3.5	3	3.5	2.5
	4-Aug	0.5	1	103	12	1	159	0.5	3.5	3	3.5	2.5
	5-Aug	0.5	2	86	11	3	184	0.5	3.5	4	3.5	2.5
EAST	30-Jul	0.5	3	65	8	4	143	5	3.5	2	3.5	-
	31-Jul	0.5	0.5	50	6	4	139	4	9	0.5	3.5	2.5
	1-Aug	0.5	0.5	58	6	3	157	4	3.5	2	3.5	2.5
	2-Aug	0.5	4	48	8	8	134	2	3.5	3	3.5	2.5
	3-Aug	0.5	10	87	8	3	168	2	3.5	4	3.5	2.5
	4-Aug	0.5	3	120	14	1	181	1	3.5	4	3.5	2.5
	5-Aug	0.5	4	61	9	1	166	4	3.5	3	3.5	2.5
AVERAGE		0.5	3.8	86.1	10.6	4.6	207.0	1.6	3.7	2.4	3.5	2.5

For concentrations detected as ND, 1/2 the detection limit was used.



WATER POLLUTION CONTROL PLANT
SITE PLAN



State of Ohio Environmental Protection Agency

DIVISION OF SURFACE WATER

RECEIVED

SEP 25 2006

Page 1

OHIO EPA NEDO

Antidegradation Addendum

In accordance with Ohio Administrative Code 3745-1-05 (Antidegradation), additional information may be required to complete your application for a permit to install or NPDES permit. For any application that may result in an increase in the level of pollutants being discharged (NPDES and/or PTI) or for which there might be activity taking place within a stream bed, the processing of the permit(s) may be required to go through procedures as outlined in the antidegradation rule. The rule outlines procedures for public notification and participation as well as procedures pertaining to the levels of review necessary. The levels of review necessary depend on the degradation being considered/requested. The rule also outlines exclusions from portions of the application and review requirements and waivers that the Director may grant as specified in Section 3745-1-05(D) of the rule. Please complete the following questions. The answers provided will allow the Ohio EPA to determine if additional information is needed. All projects that require both an NPDES and PTI should submit both applications simultaneously to avoid going through the antidegradation process separately for each permit.

A. Applicant: Mayor and Council, City of Wooster

Facility Owner: City of Wooster

Facility Location (city and county): Wooster, Wayne County

Application or Plans Prepared By: Michael A. Hunter, 4-97-001

Project Name: NPDES Permit Renewal

NPDES Permit Number (if applicable): 3PD00013*LD

B. Antidegradation Applicability

Is the application for? (check as many as apply):

☐ Application with no direct surface water discharge (Projects that do not meet the applicability section of 3745-1-05(B)1, i.e., on-site disposal, extensions of sanitary sewers, spray irrigation, indirect discharger to POTW, etc.). (Complete Section E)

☒ Renewal NPDES application or PTI application with no requested increase in loading of currently permitted pollutants. (Complete Section E, Do not complete Sections C or D).

☐ PTI and NPDES application for a new wastewater treatment works that will discharge to a surface water. (Complete Sections C and E).

☐ An expansion/modification of an existing wastewater treatment works discharging to a surface water that will result in any of the following (PTI and NPDES): (Complete Sections C and E)

- ▶ addition of any pollutant not currently in the discharge, or
- ▶ an increase in mass or concentration of any pollutant currently in the discharge, or
- ▶ an increase in any current pollutant limitation in terms of mass or concentration.

- _____ PTI that involves placement of fill or installation of any portion of a sewerage system (i.e., sanitary sewers, pump stations, WWTP, etc.) within 150 feet of a stream bed. Please provide information requested on the stream evaluation addendum (i.e., number of stream crossings, fill placement, etc.) and complete Section E.
- _____ Initial NPDES permit for an existing treatment works with a wastewater discharge prior to October 1, 1996. (Complete Sections D and E)
- _____ Renewal NPDES permit or modification to an effective NPDES permit that will result in any of the following: (Complete Sections C and E)
 - a new permit limitation for a pollutant that previously had no limitation, or
 - an increase in any mass or concentration limitation of any pollutant that currently has a limitation.

C. Antidegradation Information

1. Does the PTI and/or NPDES permit application meet an exclusion as outlined by OAC 3745-1-05(D)(1) of the Antidegradation rule?

_____ Yes (Complete Question C.2)

_____ No (Complete Questions C.3 and C.4)

2. For projects that would be eligible for exclusions provide the following information:

- a. Provide justification for the exclusion.
- b. Identify the substances to be discharged, including the amount of regulated pollutants to be discharged in terms of mass and concentration.
- c. A description of any construction work, fill or other structures to occur or be placed in or near a stream bed.

3. Are you requesting a waiver as outlined by OAC 3745-1-05(D)(2-7) of the Antidegradation rule?

_____ No

_____ Yes

If you wish to pursue one of the waivers, please identify the waiver and submit the necessary information to support the request. Depending on the waiver requested, the information required under question C.4 may be required to complete the application.

4. For all projects that do not qualify for an exclusion a report must accompany this application evaluating the preferred design alternative, non-degradation alternatives, minimal degradation alternatives, and mitigative techniques/measures for the design and operation of the activity. The information outlined below should be addressed in this report. If a waiver is requested, this section is still required.

- a. Describe the availability, cost effectiveness and technical feasibility of connecting to existing central or regional sewage collection and treatment facilities, including long range plans for

sewer service outlined in state or local water quality management planning documents and applicable facility planning documents.

- b. List and describe all government and/or privately sponsored conservation projects that may have been or will be specifically targeted to improve water quality or enhance recreational opportunities on the affected water resource.
- c. Provide a brief description below of all treatment/disposal alternatives evaluated for this application and their respective operational and maintenance needs. (If additional space is needed please attach additional sheets to the end of this addendum).

Preferred design alternative:

Non-degradation alternative(s):

Minimal degradation alternative(s):

Mitigative technique/measure(s):

At a minimum, the following information must be included in the report for each alternative evaluated.

- d. Outline of the treatment/disposal system evaluated, including the costs associated with the equipment, installation, and continued operation and maintenance.
- e. Identify the substances to be discharged, including the amount of regulated pollutants to be discharged in terms of mass and concentration.
- f. Describe the reliability of the treatment/disposal system, including but not limited to the possibility of recurring operation and maintenance difficulties that would lead to increased degradation.
- g. Describe any impacts to human health and the overall quality and value of the water resource.
- h. Describe and provide an estimate of the important social and economic benefits to be realized through this proposed project. Include the number and types of jobs created and tax revenues generated.
- i. Describe environmental benefits to be realized through this proposed project.
- j. Describe and provide an estimate of the social and economic benefits that may be lost as a result of this project. Include the impacts on commercial and recreational use of the water resource.

- k. Describe the environmental benefits lost as a result of this project. Include the impact on the aquatic life, wildlife, threatened or endangered species.
- l. A description of any construction work, fill or other structures to occur or be placed in or near a stream bed.
- m. Provide any other information that may be useful in evaluating this application.

D. Discharge Information

- 1. For treatment/disposal systems constructed pursuant to a previously issued Ohio EPA PTI, provide the following information:

PTI Number _____
 PTI Issuance Date _____
 Initial Date of Discharge _____

- 2. Has the appropriate NPDES permit application form been submitted including representative effluent data?

_____ Yes (go to E)

_____ No (see below)

If no, submit the information as applicable under **a OR b** as follows:

- a. For entities discharging process wastewater attach a completed 2C form.
- b. For entities discharging wastewater of domestic origin attach the results of at least one chemical analysis of the wastestream for all pollutants for which authorization to discharge is being requested and a measurement of the daily volume (gallons per day) of wastewaters being discharged.

- E. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate and complete.

This section must be signed by the same responsible person who signed the accompanying permit application or certification as per 40 CFR 122.22.

Signature James A. Hewery
 Date 9/21/06